

What to expect when you visit the Ophthalmologist

- Try to be there at least 10 minutes before your appointment time in case you need to complete any additional paperwork.
- Make sure you have your referral from your GP or Optometrist with you.
- Remember your Medicare card, pension card, veteran affairs card and/or any health fund cards and have these handy when you arrive.
- Allow a minimum of 2 hours for your appointment.
- Your appointment time indicates the approximate time your testing will start - this may be performed by an Orthoptist, an Ophthalmic Nurse or an Ophthalmic Technician. You will be seeing the Ophthalmologist after this testing is completed. All your results will be ready for review by the time you see the Ophthalmologist.
- Be prepared for any extra testing that may be needed on the day - it is difficult to predict what type of testing is needed for you over the phone when the appointment is made and is determined on the day.
- If you have done any extra testing at the Optometrist or any other eye clinic, try to take these results in with you on the day. The tests may still be repeated to compare results.
- Ask about the cost of any extra testing you get done on the day, how much of it is covered by Medicare and how much of it you may have to pay out of pocket - not all tests are covered by Medicare or get a Medicare rebate.
- Your eyes will be dilated on the day so that a thorough examination can be done of the nerves and the retina. The eye drops may last 2-4 hours or more. During this time your near vision will be blurry and you may be very light sensitive.
- It is advisable to arrange for somebody to pick you up after the appointment or take public transport to avoid having to drive with blurry vision and light sensitivity.

How to prepare for your appointment

- Take all glasses that you wear daily – distance, readers and/or multifocal. If your new glasses are yet to be picked up, take the prescription if available.
- Make a list of all your health conditions (e.g. asthma, type II diabetes, hypertension, heart disease, thyroid, cancer) and the approximate year/age of diagnosis.

- Take a list of the names, and dosage of all medications, vitamins or supplements taken, and any eye drops used. Note any allergies to medications and the type of reaction.

- List any family history of health complaints, in particular heart conditions (e.g. heart attack), hypertension, diabetes including type, arthritis, thyroid as well as any eye related conditions, and systemic conditions such as lupus and scleroderma.

- If diabetic, make sure you take:
 - your most recent BSL measurement, and the time it was tested, and
 - your most recent Hba1c (Glycated Haemoglobin) test result from your GP or endocrinologist.

- If on warfarin, take details of your most recent dosage and last INR reading.

Questions you might like to ask your Ophthalmologist

Prepare a list of questions you would like to ask the ophthalmologist. Examples may include:

1. Do I have glaucoma? If so, what type?
2. Can you explain to me how glaucoma affects my eyes?
3. What treatments are available in the short and long term for the condition?
4. How has glaucoma affected my vision? What area of my vision has been affected?
5. If drops are to be prescribed:
 - How long will I need to take these drops?
 - Are there any medications I am now not able to take?
 - What do I do if I forget to take my drops or miss a dose?
 - Are there any side effects of these drops? (signs to look out for that may be of concern – eyes becoming red, burning sensation, blurry vision, redness of skin around eyes/face).
 - Will they sting? Is that normal?
 - What do I do if the drops are causing me discomfort? Should I stop taking them? Should I contact the ophthalmologist to discuss this?
6. If laser treatment or surgery is suggested:
 - What laser treatments are available?
 - What surgery options are available?
 - Can you explain how this treatment will help my glaucoma?
 - Why are you choosing this treatment over other treatment options?
 - How soon will I have to do this procedure?
 - What can I expect after the laser/surgery is done? Will this cure my glaucoma? Or will I still need ongoing treatment following the procedure?
7. Is there anything I can do to slow down glaucoma progression and minimise vision loss? (e.g. dietary or exercise changes, vitamins and/or supplements).
8. What happens if I choose not to undergo any treatment?
9. What signs should I look out for which need urgent attention?
10. Will there be any sudden changes to my vision?
11. How often do I have to have my eyes checked?

After your first appointment

It is important that you leave your initial appointment with some understanding of glaucoma, what it is, and the treatment you have been advised to follow.

It is also crucial you understand the role you play in stabilising your glaucoma in order to reduce the risk of further optic nerve damage and vision loss. This is only possible to achieve if you adhere to the treatment exactly as the ophthalmologist has prescribed and that you attend all appointments made with your optometrist and ophthalmologist.

These regular follow-up appointments enable your eye care specialist to confirm if the prescribed treatment is working adequately in preventing further optic nerve damage and vision loss. Treatment modifications can take time in the early stages of glaucoma diagnosis to achieve the desired effect of keeping your eye pressures stable and at a level the ophthalmologist assesses will best limit further damage of your eye(s).

If you have any reasons that prevent you from using any prescribed treatment, do not wait until the next appointment to tell your ophthalmologist. Ring the ophthalmologist's rooms immediately to find out the appropriate action to take.